



Grade RR-R & 1-12 Application Form

Branch name

Grade

Promo/employee No.

Year applying for

Parent/family Code (Existing parents only)

Necessary supporting documents, completed sections and forms

⊕ This application will be processed only if all fields are completed legibly, are signed, and all necessary supporting documents are attached.

- Copy of learner's birth certificate/ID
- Copy of learner's latest progress report
- Copy of parents'/legal guardians' IDs
- Copy of learner's FINAL progress report once available
- Proof of residence/study permit, if foreign
- Subject choice form (for Grades 10 to 12)
- Copy of learner's vaccination records (preschool to Gr 3)
- Completed and signed debit order form
- All sections completed and signed
- Two recent ID photos of learner

Section 2: Child's personal details

Surname

Name/s as on birth certificate/ID

Preferred name

ID number

Date of birth Current age Gender: Male Female

Home language 2nd language

1st teaching language 2nd teaching language

Number of children in family Position of child in family

Nationality Country of origin Immigration date

Race: Asian African Coloured White Indian Other

Resides with: Parents Guardian Religion

Transport: Car Motorcycle Bus Taxi Bicycle Walk

Parent/ Guardian Details

Name

Address

ID/Passport No.

Telephone

Section 3: For office use only

Interview date	<input type="text"/>	Approved	YES/NO	Family code	<input type="text"/>
Notes		Date approved		Credit reference	<input type="text"/>
		Commencement date		Siblings at the school	1
		Grade			2

Section 4: Previous Nursery/ Crèche or School's Details

Current school
Address

Previous school
Address

Tel. no.

Tel. no.

Contact person

Contact person

Has admission to any other school/s ever been refused?

Yes

No

If yes, please state the reason below:

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Section 5: Child's medical details

Blood type

O+

O-

A+

A-

AB+

AB-

B+

B-

Unknown

Family doctor

Name

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Tel. no.

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Address

Medical aid

Name

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Member no.

--

Main member initials & surname

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Main member ID number

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Option

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Has the child received all the necessary immunizations?

Yes

No

If no, please state the reason below:

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Has the child suffered from any of the following illnesses?

Asthma

Enteric fever

Measles

Scarlet fever

Chickenpox

German measles

Mumps

Tick bite fever

Diabetes

Hepatitis

Polio

Typhoid fever

Diphtheria

Malaria

Rheumatic fever

Whooping cough

Does the child suffer from any allergies?

Yes

No

If yes, please provide details below:

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Does the child have any special medical needs?

Yes

No

If yes, please provide details below:

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Section 6: Personal details of Father, Stepfather, Mother, Stepmother, or Legal Guardian

Parental status Child residing with Both Parents Child residing with legal guardian
 Child residing with Father/Mother Access rights to child in emergency only
 Only (Please specify)

Section 7: Emergency contact details (not parents)

Full names & surname
 Relationship
 Tel. H Tel. W Cell
 Email address

Section 8: Details – Person responsible for account

Surname
 Full names as on ID
 ID number

Designation Mr Mrs Ms Miss Dr
 Rev. Prof. Other

Relationship Marital status
 Occupation Employer

Residential address	Work address	Postal address
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Tel. H Tel. W Cell

Email address

Parental status: Child residing with Both Parents Child residing with legal guardian
 Child residing with Father/Mother Access rights to child in emergency only
 Only (Please specify)

Details of children in your care who are currently at this school:

1. Name <input type="text"/>	Gr <input type="text"/>	2. Name <input type="text"/>	Gr <input type="text"/>
3. Name <input type="text"/>	Gr <input type="text"/>	4. Name <input type="text"/>	Gr <input type="text"/>

Method of payment * Debit order form to be completed with Enrolment contract.

Section 9: Signature of parent, legal guardian, and/or account holder

We/I, the undersigned, _____, hereby certify that the information provided in this application for admission is complete and accurate. We/I acknowledge that enrolment is subject to signing a child enrolment contract that contains the detailed requirements and the terms & conditions for admission into the school.

We/I hereby authorise the Lakewood International Academy and/or its associates to conduct any credit inquiries on us/me as may be deemed necessary from time to time.

We/I acknowledge that we have read the school-specific policies, as well as the school rules and will accept an offer of placement for our child at the school in accordance with the terms and conditions as set out therein. These documents, as amended from time to time, are available on the school communication platforms.

NB: The signatures of the account holder and both parents and/or legal guardians are required where applicable.

Signature of account holder

Date

Signature of father/stepfather/legal guardian

Date

Signature of mother/stepmother/legal guardian

Date

Section 10: Services or facilities required

School transport Yes No From

Aftercare Yes No

Swimming Lessons Yes No To

Section 11: Survey – Marketing

Where did you hear about us? Please indicate with an X.

Billboard Newspaper Magazine Radio Presentation

Friend Brochure Flyer Exhibition Web

Other (specify):

How satisfied are you with the service you have received during the application process?

Very satisfied Satisfied Unsatisfied Very unsatisfied

Was the information received during the application process:

Relevant Informative Sufficient

If not, please provide further details below: